

Legislative Committee
January 24th, 2013
1300-1500
Daytona Beach, Florida

Welcome to all participants.

An update from the Bureau was provided by Chief Bixler.

A. The following bills discussed and is being monitored:

1. HB 3/SB66 Child Safety Devices in Motor Vehicles

This bill is providing child restraint requirements for children of specified ages who are less than a specified height. Children who are younger than 8 years of age and less than 4 feet 9 inches in height. Current law is 5 years of age.

2. HB 9/SB 110 Involuntary Examinations under the Baker Act

Authorizing physician assistants and advanced registered nurse practitioners to initiate involuntary examinations under the Baker Act. Currently restricted to physician, clinical psychologist, psychiatric nurse, mental health counselor, marriage and family therapist, clinical social worker, law enforcement and the courts.

3. HB 13 / SB 52 / SB 74 / SB 152 / SB 396 Use of Wireless Communication Devices While Driving

Prohibits operation of motor vehicle while using wireless communications device for certain purposes. There is an exclusion for law enforcement, fire service personnel and emergency medical services professionals when performing official duties as an operator of an authorized emergency vehicle as defined 322.01.

4. HB 83/SB 56 Infant Death

Revising legislative intent with respect to the sudden unexpected death of an infant under a specified age. This includes the redefining Sudden Infant Death to Sudden Unexpected Infant Death. Revising provisions relating to training requirements for first responders

Redefined as SUID – Sudden Unexpected Infant Death (the death of any infant younger than 1 year of age who dies suddenly and unexpectedly while in apparent good health falls under the jurisdiction of the medical examiner as provider in 406.11

5. HB 195 (No Senate Sponsor) Emergency Medical Services (aka Danny's Bill)

Deleting the HIV/AIDS training requirements, redefining the terms Basic Life Support and Advanced Life Support, changes the strategic plan from 2 years to 5 years, revising the time limit by which applicants trained outside the state must complete the certification examination without having to submit a new application

6. SB 302 Cardiopulmonary Resuscitation Training in Public Schools

Requiring school districts to provide training in CPR to students at least one time before they graduate from high school based on an instructional program established by the American Heart Association, the American Red Cross, or another nationally recognized program that uses the most current evidence based emergency cardiovascular care guidelines and incorporates the development of psychomotor skills into the program.

7. SB 458 Firefighter and Police Officer Pension Plans Filed yesterday by Senator Ring

Providing for an additional mandatory payment by the municipality or special fire control district to the firefighters' pension trust fund.

B. Reimbursement Updates:

The pre-payment review initiated by First Coast Service Options in December 2011, was suspended last month after 12 months of manual claim submissions.

The 2% Medicare adjustment scheduled to sunset on December 31st was extended on a temporary basis.

Beginning October 1st there will be a 10% reduction in the amount allowed for BLS non-emergency ambulance transportation for dialysis. This is a permanent reduction.

On October 3rd the US Inspector General's released its work plan for Fiscal Year 2013. The report mentions ambulance in only one area. The IG intends to examine Medicare claims data to identify questionable billing practices for ambulance services. Two examples listed are billing for transports that were not medically necessary and potentially unnecessary claims for ALS and SCT services.

As part of the Middle Class Tax Relief and Job Creation Acct of 2012 the Medicare Payment Advisory Commission (MEDPAC) was directed to look at Medicare payment policies for ambulance services as well as other provider groups. Congress requested MedPAC study the appropriateness of the temporary ambulance adjustments, the impact of these adjustments on margins and to suggest changes in the Medicare ambulance fee

schedule. It will be up to Congress on whether to accept any of the seven (7) recommendations made by MedPAC.

C. We will continue to monitor these proposed changes and update the group.

D. No other item discussed. Meeting adjourned at 1455.